


TRANSMITTAL FORM

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	Application Number	10/007,832	RECEIVED OCT 20 Technology Center 2100
	Filing Date	11/05/2001	
	First Named Inventor	Paul Bette, et al.	
	Group Art Unit	2114	
	Examiner Name	Damiano, Anne L	
Total Number of Pages in this Submission	6	Attorney Docket Number	2000-0587

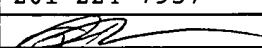
Enclosures (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits / Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Assignment & Recordation Cover Sheet <input type="checkbox"/> Drawing(s) & Letter to Official Draftsman <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition to the Commissioner <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Authorization to Act in a Representative Capacity; Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communications to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communications to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> CD, Number of CDs <input type="checkbox"/> Additional enclosure(s) (please identify below) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
Remarks		


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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME	Gary H. Monka	Reg. #	35290
TELEPHONE	201-224-7957		
SIGNATURE		DATE	10/18/04

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage thereon as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: 10/18/04			
Type or Printed Name	Gary H. Monka		
Signature		Date	10/18/04

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GP 2114
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PATENT
AT&T IDS NO.: 2000-0587

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Paul Bette, et al.

Serial No.: 10/007,832

Filed: November 5, 2001

For: **METHODS OF PROACTIVE
MAINTENANCE BY AUTOMATIC
CREATION OF TROUBLE
TICKETS**

Examiner: Damiano, Anne L

Art Unit: 2114

RECEIVED

OCT 25 2004

Technology Center 2100

AMENDMENT AND RESPONSE TO OFFICE ACTION

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated August 3, 2004, please amend the above-identified application as follows.

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks begin on page 5 of this paper.